### Case 15-41016 Doc 1 Filed 12/02/15 Entered 12/02/15 17:48:50 Desc Main Document Page 1 of 39

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	George First name  D. Middle name  Sullivan Last name and Suffix (Sr., Jr., II, III)	Susan First name  Middle name  Sullivan  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4425	xxx-xx-0830

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Debtor 1
Debtor 2
Debtor 2
George D. Sullivan
Susan Sullivan

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	7716 N. Ashland Ave, Unit 3	If Debtor 2 lives at a different address:
		Chicago, IL 60626  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other
		other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 2 Susan Sullivan					Case i	number (if known)			
Par	t 2: Tell the Court About	our Bar	nkruptcy Ca	ise						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Cha	apter 7							
		☐ Chapter 11								
		☐ Cha	apter 12							
		☐ Cha	apter 13							
8.	How you will pay the fee	_ a	bout how yo	ou may pay. Typically, if you a attorney is submitting your pa	are paying	the fee yourself,	the clerk's office in your local or you may pay with cash, cashing attorney may pay with a creater that a creat	er's check, or money		
			need to pay			e this option, sign	and attach the Application fo	r Individuals to Pay		
			request tha	it my fee be waived (You ma	ay request	this option only i	f you are filing for Chapter 7. I me is less than 150% of the c	By law, a judge may,  official poverty line that		
		а	pplies to you	ur family size and you are una	able to pay	the fee in install	Iments). If you choose this op m 103B) and file it with your p	tion, you must fill out		
9.	9. Have you filed for bankruptcy within the last 8 years?									
	last o years:	■ Yes.	•	Northern District of						
				Illinois, Eastern		0/00/45	. 45.0	0004		
			District	Division	When	6/30/15	Case number 15-2	2621		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy	□ No								
	cases pending or being filed by a spouse who is not filing this case with you, or by a business	■ Yes.								
	partner, or by an affiliate?									
			Debtor	Eco Smart Building Ll	LC		Relationship to you	Debtor's former buisiness		
				Northern District of Illinois, Eastern						
			District	Division	When	7/10/15	Case number, if known	15-23679		
			Debtor				Relationship to you			
			District		When		Case number, if known			
11.	Do you rent your	■ No.	Go to I	ine 12.						
	residence?	☐ Yes.	Has vo	our landlord obtained an evict	ion judgm	ent against you a	and do you want to stay in you	r residence?		
		03.		No. Go to line 12.	, 3	5 7 7 8 4	, , , , , , , , , , , , , , , , , , , ,			
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	nt About ar	Eviction Judgm	ent Against You (Form 101A)	and file it with this		
				1 71						

Debtor 1 George D. Sullivan

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Deb	tor 1 <b>George D. Sulliva</b> tor 2 <b>Susan Sullivan</b>	n	Document	Case number (if known)	
Part	3: Report About Any Bu	sinesses `	ou Own as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP	Code	
	it to this petition.		Check the appropriate box to des	cribe your business:	
			☐ Health Care Business (as	defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate	(as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in	n 11 U.S.C. § 101(53A))	
			☐ Commodity Broker (as de	fined in 11 U.S.C. § 101(6))	
			☐ None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheeperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follows 11 U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but Code.	am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapter 11 and	am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	Hazardous Property or Any Prope	rty That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?		What is the hazard?		
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	r, Street, City, State & Zip Code	

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	George D. Sullivan	
Debtor 2	Susan Sullivan	Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a Incapacity. mental deficiency that makes me incapable of realizing or making rational decisions about finances.

> Disability. My physical disability causes me to be unable to participate in a briefing in person, by

phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

I have a mental illness or a mental Incapacity. deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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George D. Sullivan Debtor 1 Debtor 2 Susan Sullivan Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion ■ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion ■ \$1,000,001 - \$10 million estimate your liabilities **S**50.001 - \$100.000 □ \$1.000.000.001 - \$10 billion □ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

to be?

**\$100,001 - \$500,000** 

□ \$500,001 - \$1 million

□ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

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Fill in this information to id	entify your case:		
United States Bankruptcy Co	urt for the:		
NORTHERN DISTRICT OF I	LLINOIS		
Case number (if known)		Chapter you are filing under:	
		Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
	7	☐ Chapter 13	☐ Check if this an amended filing
B 101			
<b>Voluntary Pet</b>	ition for Individua	als Filing for Bankrupt	C <b>y</b> 12/15
Be as complete and accurations space is needed, attace every question.	e as possible. If two married peop h a separate sheet to this form. O	le are filing together, both are equally responsi n the top of any additional pages, write your	nsible for supplying correct information. If name and case number (if known). Answer
Part 7: Sign Below			
For you	If I have chosen to file under C United States Code. I understa	and I declare under penalty of perjury that the in hapter 7, I am aware that I may proceed, if eliging the relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
	If no attorney represents me and document, I have obtained and	nd I did not pay or agree to pay someone who is I read the notice required by 11 U.S.C. § 342(b)	not an attorney to help me fill out this
	I request relief in accordance v	vith the chapter of title 11, United States Code,	specified in this petition.
	I understand making a false state bankruptcy ease can result in fand 3571  George D. Sullivan Signature of Debtor 1	atement, concealing property, or obtaining mone ines up to \$250,000, or imprisonment for up to 2 Susan Sulliva Signature of De	20 years, or both. 18 U.S.C. §§,152, 1341, 1519,
	Executed on 12-01/	tol5 Executed on	12-02-2015 MM/DD/YYYY

MM / DD / YYYY

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		1700.11111	.III FAUE 0 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	George D. Sulliva	ın		
	First Name	Middle Name	Last Name	
Debtor 2	Susan Sullivan			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(				amended filing

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	475,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	216,357.23
	1c. Copy line 63, Total of all property on Schedule A/B	\$	691,357.23
Pai	t 2: Summarize Your Liabilities		
			<b>liabilities</b> nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,022,317.31
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	102,976.31
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	159,752.94
	Your total liabilities	\$	1,285,046.56
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,994.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	13,470.00
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other s	chedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 George D. Sullivan
Debtor 2 Susan Sullivan

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,623.60

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	102,976.31
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	102,976.31

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n this informati	on to identify	your case and th					
or 1	George D. S	ullivan					
			Name	Last Name			
			e Name	Last Name			
ed States Bankru	aptcy Court for	tne: NORTHER	N DISTRICT OF ILLIN	NOIS			
e number				_			Check if this is an amended filing
hedule	A/B: Pr	operty	an asset only once. If a	on asset fits in more than one satu	ogory list the as	esot in the	12/15
it fits best. Be as nation. If more sp er every question	complete and a ace is needed, a	accurate as possibl attach a separate s	le. If two married people heet to this form. On the	e are filing together, both are equ e top of any additional pages, wr	ally responsible	for supp	ying correct
you own or have	any legal or eq	uitable interest in a	ny residence, building,	land, or similar property?			
No. Go to Part 2.							
Yes. Where is the	property?						
7716 N. Achl	and Ava Uni	4.2	What is the property	,			
			_ ~ .				
,			_ Buplox of man	ti-unit building C			
			☐ Condominium	or cooperative			
01.1			☐ Manufactured	or mobile home C	urrent value of th	ne C	Current value of the
			Land			•	ortion you own? \$475.000.00
City	State	ZIF Code	☐ Investment pro☐ Timeshare	operty	<b>Ψ473,000</b>	.00	\$475,000.00
			Other	D	escribe the natu	re of your	ownership interest
				1-			y by the entireties, or
			Who has an interest				y by the chineties, or
			one.	a a	life estate), if kn		y by the chinetics, or
Cook			one.  Debtor 1 only	a a	life estate), if kn		y by the chareties, or
<b>Cook</b> County			one.  Debtor 1 only	F	life estate), if kno ee Simple	own.	
			one.  Debtor 1 only  Debtor 2 only  Debtor 1 and I	F	life estate), if kn	own.	
			one.  Debtor 1 only Debtor 2 only Debtor 1 and I At least one of Other information you	Debtor 2 only f the debtors and another ou wish to add about this item, so	life estate), if known the ee Simple  Check if this is (see instruction)	own.	
			one.  Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	Debtor 2 only f the debtors and another ou wish to add about this item, so	life estate), if known the ee Simple  Check if this (see instruction the limit is considered).	own.	
			one.  Debtor 1 only Debtor 2 only Debtor 1 and I At least one of Other information you	Debtor 2 only f the debtors and another  ou wish to add about this item, so	life estate), if known the ee Simple  Check if this (see instruction the limit is considered).	own.	
	or 1 or 2 se, if filing) ed States Bankro enumber icial Form hedule h category, separ it fits best. Be as nation. If more sper every question Describe Eac you own or have No. Go to Part 2. Yes. Where is the	n this information to identify or 1  George D. Si First Name or 2 se, if filing)  ed States Bankruptcy Court for e number  icial Form 106A/B hedule A/B: Pr h category, separately list and dit fits best. Be as complete and a nation. If more space is needed, are every question.  Describe Each Residence, Bu you own or have any legal or eq No. Go to Part 2.  Yes. Where is the property?  7716 N. Ashland Ave, Uni Street address, if available, or other des	George D. Sullivan First Name Middle Susan Sullivan First Name Middle More Market Northe:  NORTHER  In Category, separately list and describe items. List at it fits best. Be as complete and accurate as possible nation. If more space is needed, attach a separate sleer every question.  Describe Each Residence, Building, Land, or Otte you own or have any legal or equitable interest in a No. Go to Part 2.  Yes. Where is the property?  7716 N. Ashland Ave, Unit 3  Street address, if available, or other description  Chicago IL 60626-0000	This information to identify your case and this filing:  or 1  George D. Sullivan First Name  Or 2 Susan Sullivan First Name  Middle Name  or 3 Susan Sullivan  First Name  Middle Name  MoRTHERN DISTRICT OF ILLING  If it is best. Be as complete and accurate as possible. If two married people in the strict of the th	n this information to identify your case and this filing:  or 1  George D. Sullivan First Name Middle Name Last Name Or 2 Susan Sullivan First Name Middle Name Last Name And States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  anumber  icial Form 106A/B hedule A/B: Property  h category, separately list and describe items. List an asset only once. If an asset fits in more than one cate it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, we are every question.  Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply.  7716 N. Ashland Ave, Unit 3  Street address, if available, or other description  What is the property? Check all that apply.  Gondominium or cooperative  Manufactured or mobile home  Chicago  IL 60626-0000  IL 100626-0000  IL 2016 IL 100626-0000  IL 2016 IL 2016 IL 100626-0000  INVESTIGATION OF THE ABOVE	Document Page 10 of 39  In this information to identify your case and this filling:  or 1 George D. Sullivan First Name Middle Name Last Name  Susan Sullivan First Name Middle Name Last Name  ad States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  an unmber  icial Form 106A/B  hedule A/B: Property  h category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the ast if tits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible attemption. On the top of any additional pages, write your name are revery question.  If Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property?  City State ZIP Code  One of the surface of the surface of the entire property?  \$475,000	Document Page 10 of 39  In this information to identify your case and this filling:  or 1 George D. Sullivan First Name Middle Name Last Name  or 2 Susan Sullivan First Name Middle Name Last Name  and States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  enumber   Interest of the county of the count

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$475,000.00

Β.	abtar 1	Case 15-4  George D. Se		Doc 1	Filed 12/02/15 Document	Entered 12/02/ Page 11 of 39	15 17:48:50	Desc Main
	ebtor 1 ebtor 2	Susan Sulliv				Cas	se number (if known)	
3.	Cars, va	ans, trucks, tract	tors, sport	t utility vehi	icles, motorcycles			
	□ No							
	■ Yes							
3	3.1 Mak	xe: Volkswag	gon		Who has an interest in th	ne property? Check one.		ured claims or exemptions. Put secured claims on Schedule D:
	Mod	del: Golf TDI			Debtor 1 only			ve Claims Secured by Property.
	Yea				Debtor 2 only		Current value of t	
		roximate mileage: er information:	1	10,000	☐ Debtor 1 and Debtor 2 ☐ At least one of the deb	•	entire property?	portion you own?
		air condition	has som	e	At least one of the deb	tors and another		
		idalism damag		-	☐ Check if this is comm	nunity property	\$7,100	.00 \$7,100.00
		eds replacemen						
		otential subjec air of hardward						
		VW for faulty e						
	sys	tems and EPA	violation	ıs.	(see instructions)			
5	Add the	e dollar value of	the portio	n you own	for all of your entries f	rom Part 2, including any	/ entries for pages	<b>\$7.400.00</b>
5						rom Part 2, including any		\$7,100.00
	.you ha		Part 2. Wri	te that num	ber here			\$7,100.00
Pa	you ha	ve attached for F escribe Your Perso	Part 2. Wri	te that num	ber here			Current value of the portion you own? Do not deduct secured
Pa	you hand art 3: Decoyou over thouseh	ve attached for F escribe Your Perso wn or have any le hold goods and fe les: Major applian	Part 2. Wri	te that num  pusehold Iten  uitable inte	nber here			Current value of the portion you own?
Pa	you hand art 3: Decoyou over thouseh	ve attached for F escribe Your Perso wn or have any le	Part 2. Wri	te that num ousehold Iten uitable inte s ure, linens, c	ns rest in any of the follow			Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa	you hand art 3: Decoyou over thouseh	ve attached for F escribe Your Perso wn or have any le hold goods and fe les: Major applian	Part 2. Wri	te that num  pusehold Iten  uitable inte	ns rest in any of the follow			Current value of the portion you own? Do not deduct secured
Pa Do	Househ Exampl No Electroi Exampl	ve attached for F escribe Your Perso wn or have any le cold goods and foles: Major applian Describe  nics les: Televisions and	Part 2. Wri	te that num busehold Iten uitable inter s ure, linens, o aneous fu	ns rest in any of the follow china, kitchenware	ving items?	=>	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Househ Example No Yes.  Collectin Example No	ve attached for F escribe Your Perso wn or have any le fold goods and fi les: Major applian  Describe  nics les: Televisions ar including cell  Describe  bles of value les: Antiques and other collection	Part 2. Wri	sure, linens, of america, me	ns rest in any of the follow china, kitchenware rnishings o, stereo, and digital equidia players, games	ving items?	s, scanners; music co	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Househ Example No Yes.  Collectin Example No	ve attached for F escribe Your Perso wn or have any le cold goods and foles: Major applian Describe  nics les: Televisions an including cell Describe  bles of value les: Antiques and	Part 2. Wri	sure, linens, of america, me	ns rest in any of the follow china, kitchenware rnishings o, stereo, and digital equidia players, games	ving items?	s, scanners; music co	Current value of the portion you own? Do not deduct secured claims or exemptions.  \$1,000.00
6. 7. 8.	Househ Example No Yes.  Collecti Example Example No Yes.  Collecti Example	ve attached for F escribe Your Perso wn or have any le cold goods and foles: Major applian Describe  nics les: Televisions an including cell Describe  bles of value les: Antiques and other collection Describe  ent for sports ar	Part 2. Wri  part	aneous fu audio, video ameras, me	ns rest in any of the follow china, kitchenware rnishings  o, stereo, and digital equidia players, games rints, or other artwork; be	ving items?  ipment; computers, printers  poks, pictures, or other art	s, scanners; music co	Current value of the portion you own? Do not deduct secured claims or exemptions.  \$1,000.00
6. 7. 8.	Househ Example No Yes.  Collecti Example Example No Yes.  Collecti Example No	ve attached for F escribe Your Perso wn or have any le cold goods and for les: Major applian  Describe  nics les: Televisions an including cell  Describe  bles of value les: Antiques and other collection  Describe  ent for sports ar les: Sports, photo	Part 2. Wri  part	aneous fu audio, video ameras, me	ns rest in any of the follow china, kitchenware rnishings  o, stereo, and digital equidia players, games rints, or other artwork; be	ving items?  ipment; computers, printers  poks, pictures, or other art	s, scanners; music co	Current value of the portion you own? Do not deduct secured claims or exemptions.  \$1,000.00  ollections; electronic devices or baseball card collections;

Official Form 106A/B

Schedule A/B: Property

		Document	Page 12 of 39		
Debtor 1 Debtor 2	George D. Sullivan Susan Sullivan		C	Case number (if known)	
10. Firear		sition, and related equipmen	•		
■ No	ples: Pistols, rifles, shotguns, ammur	illion, and related equipmen	ı		
	Describe				
11. Clothe	es oples: Everyday clothes, furs, leather	coate designer wear shoes	accessories		
□ No		boats, designer wear, snoes	, accessories		
■ Yes.	Describe Miscellaneous	clothing			\$600.00
■ No	ples: Everyday jewelry, costume jewe	elry, engagement rings, wed	ding rings, heirloom jew	velry, watches, gems, o	gold, silver
☐ Yes.	Describe				
Exam	arm animals oples: Dogs, cats, birds, horses				
■ No □ Yes.	Describe				
	ther personal and household items	you did not already list, ir	ncluding any health aid	ds you did not list	
■ No □ Yes.	Give specific information				
for P	the dollar value of all of your entried art 3. Write that number here			ou have attached	\$1,900.00
Do you o	wn or have any legal or equitable ii	nterest in any of the follow	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in your wallet,			hen you file your petiti	on
<b>—</b> 103.				Cash	\$1,500.00
	sits of money sples: Checking, savings, or other fina institutions. If you have multiple	accounts with the same ins	stitution, list each.	dit unions, brokerage	houses, and other similar
Yes.		Institution r	iame:		
	17.1.	Checking	account at Bank of	f America	\$400.00
	17.2.	Checking	account at Ben Fra	anklin Bank	\$75.00
Exam	s, mutual funds, or publicly traded ples: Bond funds, investment accoun		ney market accounts		
■ No □ Yes	Institution	or issuer name:			

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Official Form 106A/B Schedule A/B: Property page 3

Entered 12/02/15 17:48:50 Case 15-41016 Doc 1 Filed 12/02/15 Desc Main Page 13 of 39 Document George D. Sullivan Debtor 1 Debtor 2 Susan Sullivan Case number (if known) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Charles Schwab retirement account from** \$6,700.00 employment 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... ComEd security deposit \$175.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements □ No Yes. Give specific information about them... \$200.00 Copyright (dated) 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own?

Official Form 106A/B Schedule A/B: Property page 4

Do not deduct secured claims or exemptions.

		Case 15-41016	Doc 1	Filed 12/02/15	Entered 12/02/15 17:48:50	Desc Main
	ebtor 1 ebtor 2	George D. Sullivan Susan Sullivan		Document	Page 14 of 39  Case number (if known)	
		unds owed to you				-
20.	■ No	unus owed to you				
	☐ Yes.	Give specific information ab	out them, in	cluding whether you alrea	ady filed the returns and the tax years	
29.		support les: Past due or lump sum	alimony, spo	ousal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	■ No	0				
	⊔ Yes.	Give specific information				
		imounts someone owes y les: Unpaid wages, disabilit benefits; unpaid loans	ty insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	☐ Yes.	Give specific information				
31.		ts in insurance policies		h	ICA), and the base are made at a market of a language	
	□ No	wes: Health, disability, or life	e insurance;	neaith savings account (i	HSA); credit, homeowner's, or renter's insura	nce
	Yes.	Name the insurance compa	ny of each poany name:	oolicy and list its value.	Beneficiary:	Surrender or refund
		·	•	term life insurance	20.10.1014.1,1	value:
		prov	rided throu	igh employer, Debto	ris	\$0.00
		bene	eficiary			φυ.υυ
32.	If you a	erest in property that is do are the beneficiary of a living ne has died.			d surance policy, or are currently entitled to rec	eive property because
	_	Give specific information				
		against third parties, whe			t or made a demand for payment to sue	
	■ Yes.	Describe each claim				
			Claim	for unpaid rent again	nst Bianca Ganvic	\$23,000.00
			amoui Locati	nts to be paid disput ion: 7716 N. Ashland	ce for damage to building, ed by insurance Ave, Unit 3, Chicago IL 60626 (also Bex for property damage)	\$47,000.00
			-		d against Bonnie Lalka	\$5,500.00
				•		
-			Claim	against ComEd for s	services	\$700.00
			Claim	against Alliant Energ	gy for services	\$2,700.00
					ny and Peter Bex for property rented from Debtors	\$67,000.00
			Claim	against Ben Franklir	Bank for funds held in escrow	\$2,107.23
			Potent vehicle		kswagen for defect in diesel	Unknown

Official Form 106A/B Schedule A/B: Property

Claim against Ben Franklin Bank for funds paid in re-finance

page 5

\$50,000.00

	Case 15-4		Doc 1	Filed 12/02/15 Document	Entered 12/0 Page 15 of 39	2/15 17:48:50	Desc Main
Debtor 1 Debtor 2	George D. Su Susan Sulliva					Case number (if known)	
■ No	contingent and u		ed claims of	every nature, includin	g counterclaims of the	e debtor and rights to	set off claims
	nancial assets yo		already list				
■ No	Give specific info						
				om Part 4, including a			\$207,057.23
Part 5: De	scribe Any Busines	ss-Related	Property You	Own or Have an Interest	In. List any real estate in	Part 1.	
37. <b>Do you o</b> No. Go		gal or equi	table interest	in any business-related p	roperty?		
Yes. 0	Go to line 38.						
							Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	nts receivable or Describe	commiss	sions you alr	eady earned			
Examp □ No -		shings, a ated comp	nd supplies outers, softwa	re, modems, printers, co	opiers, fax machines, ru	ugs, telephones, desks	, chairs, electronic devices
■ Yes.	Describe						
		Compu	ter and prii	nter			\$100.00
□ No	nery, fixtures, equ	uipment,	supplies you	u use in business, and	tools of your trade		
		Miscella	aneous har	nd tools			\$200.00
41. Invento ■ No □ Yes.	Describe						
42. <b>Interes</b> □ No	sts in partnership	s or joint	ventures				
■ Yes.	Give specific info		bout them e of entity:			% of ownership:	
				Eco-Smart Building d in a pending Chap		%	\$0.00
		Corp		of Net Zero Analysis y presently operatin ofit.		_ %	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

		Case 15-410.	10 DOC 1		.2/02/15	Page 16 of	2/02/13 17.46.30	Desc Main
Debte	or 1	George D. Sulliva	an	Docu	шеш	raye 10 01	39	
Debto	or 2	Susan Sullivan					Case number (if known)	
43. <b>C</b>	ustom	ner lists, mailing lists	s, or other comp	oilations				
	No.							
	Do you	r lists include personal	lly identifiable info	ormation (as de	efined in 11 U	.S.C. § 101(41A))?		
		No						
		Yes. Describe						
44. <b>A</b>	ny bus	siness-related prope	erty you did not	already list				
	No							
	Yes. 0	Give specific informati	on					
							jes you have attached	\$300.00
,	for Pa	rt 5. Write that numb	per here					
Don't C	D			n Dalatad Duan			-4 l-	
Part 6		scribe Any Farm- and Co ou own or have an interes			erty You Ow	n or Have an Intere	St In.	
40. 5								
_		own or have any leg	jai or equitable	interest in an	ly farm- or	commercial fishir	ig-related property?	
		Go to Part 7.						
L		Go to line 47.						
								Current value of the
								portion you own?
								Do not deduct secured claims or exemptions.
Part 7	A Des	scribe All Property You	Own or Have an I	nterest in That	You Did Not	List Ahove		
· arr	. 500	ionibo / iii r roporty rou	own or mare and	- Itoroot III Tilat		. 2.0171.0010		
		have other property			ady list?			
		les: Season tickets, co	ountry club mem	bership				
	No							
Ц	Yes. (	Give specific information	on					
<b>-</b> 4	A -1 -1 41		-f	fuero Deut 7 I	Muita that w			40.00
54.	Add ti	ne dollar value of all	or your entries	from Part 7.	write that n	iumber nere		\$0.00
Part 8	l ict	the Totals of Each Bar	t of this Form					
Faito	LIST	the Totals of Each Par	t of this Form					
55.	Part 1	: Total real estate, lir	ne 2					\$475,000.00
56.	Part 2	: Total vehicles, line	5			\$7,100.00		· · ·
		: Total personal and		ıs, line 15		\$1,900.00		
		: Total financial asse	•			\$207,057.23		
59.	Part 5	: Total business-rela	ited property, li	ne 45		\$300.00		
60.	Part 6	: Total farm- and fish	ning-related pro	perty, line 52	<u> </u>	\$0.00		
		: Total other propert	-		+	\$0.00		
00	T-/-!		dd lines 50 (l	. m.b. 04		**************************************	0	<b>***</b>
62.	ı otal	personal property. A	aa lines 56 throu	ıgn 61	_	\$216,357.23	Copy personal property t	otal <b>\$216,357.23</b>
00		<b>.</b>		==				
63.	Total	of all property on Sci	<b>nedule A/B</b> . Add	I line 55 + line	<del>)</del> 62			\$691,357.23

Official Form 106A/B Schedule A/B: Property page 7

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		17(7(4)))))	111 1 2000 17 01 3.2	
Fill in this infor	mation to identify your	case:		
Debtor 1	George D. Sulliva	n		
	First Name	Middle Name	Last Name	
Debtor 2	Susan Sullivan			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt
---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
7716 N. Ashland Ave, Unit 3 Chicago, IL 60626 Cook County	\$475,000.00		\$30,000.00	735 ILCS 5/12-901	
3 unit residential building Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
Miscellaneous furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. V.1			100% of fair market value, up to any applicable statutory limit		
2 Schwinn Urban Bicycles Line from Schedule A/B: 9.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Ellie Holli Govedale 775.			100% of fair market value, up to any applicable statutory limit		
Miscellaneous clothing Line from Schedule A/B: 11.1	\$600.00		\$600.00	735 ILCS 5/12-1001(a)	
Line Holli Goreage A.B. 1111			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)	
Ello Holli Golloddio A/D. 19.1			100% of fair market value, up to any applicable statutory limit		

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George D. Sullivan Debtor 1 Susan Sullivan Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking account at Bank of 735 ILCS 5/12-1001(b) \$400.00 \$400.00 **America** Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking account at Ben Franklin 735 ILCS 5/12-1001(b) \$75.00 \$75.00 Bank Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Charles Schwab retirement account** 735 ILCS 5/12-1006 \$6,700.00 \$6,700.00 from employment Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Joint debtor - term life insurance 215 ILCS 5/238 \$0.00 \$0.00 provided through employer, Debtor is beneficiary 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 31.1 Claim against Ben Franklin Bank for 735 ILCS 5/12-1001(b) \$2,107.23 \$2,107.23 funds held in escrow Line from Schedule A/B: 33.7 100% of fair market value, up to any applicable statutory limit Computer and printer 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 39.1 100% of fair market value, up to any applicable statutory limit Miscellaneous hand tools 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes Case 15-41016 Doc 1 Filed 12/02/15 Entered 12/02/15 17:48:50 Desc Main

		Document	Page 19	ot 39		
Fill in this information to	o identify your	case:				
Debtor 1 Geo	rge D. Sulliv	an Middle Name	Last Name			
Debtor 2 Susa	an Sullivan					
(Spouse if, filing) First No		Middle Name	Last Name		-	
United States Bankruptcy	Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case number (if known)						if this is an ded filing
Official Form 106l	D					
Schedule D: Cı	reditors	Who Have Claims	Secured	by Propert	У	12/15
		two married people are filing togeth ut, number the entries, and attach it				
Do any creditors have clai	•					
☐ No. Check this box	and submit th	is form to the court with your other	schedules. You	u have nothing else t	to report on this form.	
Yes. Fill in all of the	e information b	elow.				
Part 1: List All Secure	ed Claims					
2. List all secured claims. If	f a creditor has m	nore than one secured claim, list the cre	editor separately	Column A	Column B	Column C
		a particular claim, list the other creditor all order according to the creditor's name		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ben Franklin Bar	nk	Describe the property that secures	the claim:	\$1,009,075.82	\$475,000.00	\$534,075.82
Random Street, City, State  Who owes the debt? Chec  Debtor 1 only  Debtor 2 only	s, IL e & Zip Code	7716 N. Ashland Ave, Unit 3 Chicago, IL 60626 Cook Co 3 unit residential building As of the date you file, the claim is: apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, me	Check all that	ured		
■ Debtor 1 and Debtor 2 on  At least one of the debtors	•	☐ Judgment lien from a lawsuit	chames herry			
Check if this claim relate community debt		Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account number	ber 7542			
2.2 Volkswagon Cre	dit	Describe the property that secures	the claim:	\$13,241.49	\$7,100.00	\$6,141.49
Creditor's Name PO Box 5215		2012 Volkswagon Golf TDI 1 miles Fair condition has some vandalism damage, fuel pun needs replacement, and is a potential subject to recall or of hardware and software by faulty emissions systems ar viol As of the date you file, the claim is: apply.	mp also a r repair y VW for nd EPA			
Carol Stream, IL  Number, Street, City, State		☐ Contingent ☐ Unliquidated				
,,,,		Disputed				
Who owes the debt? Ched	ck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or secu	ured		
Debtor 2 only Debtor 1 and Debtor 2 on	h.	car loan)	obonialo !!\			
■ Deptor 1 and Deptor 2 on	IIV	☐ Statutory lien (such as tax lien, me	crianic's lien)			

Official Form 106D

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Debtor 1	George D. Sullivan		<u> </u>		
	First Name	Middle N	Name Last Name	<del></del>	
Debtor 2	Susan Sulliva	an			
	First Name	Middle N	Name Last Name	<del></del>	
At leas	st one of the debtors	and another	☐ Judgment lien from a lawsuit		
	cif this claim relate nunity debt	es to a	☐ Other (including a right to offset	<u></u>	
Date deb	t was incurred		Last 4 digits of account nu	number 4903	
	•		Column A on this page. Write that no	* /- /-	
	s the last page of your state of the state o	our form, add	I the dollar value totals from all pag	ges. \$1,022,317.31	
Part 2:	List Others to B	e Notified fo	or a Debt That You Already List	ted	
trying to than one debts in	collect from you fo creditor for any of Part 1, do not fill ou	r a debt you o the debts tha	owe to someone else, list the crediton t you listed in Part 1, list the addition	for a debt that you already listed in Part 1. For example, if a collection agency is tor in Part 1, and then list the collection agency here. Similarly, if you have more ional creditors here. If you do not have additional persons to be notified for any	
Na	ame Address				
_	en Franklin Bai I 48 Kirchoff Ro			On which line in Part 1 did you enter the creditor? 2.1	
-	olling Meadows		}	Last 4 digits of account number	

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		Document	Page 21 of 3	9	,	_			
Fill in this infor	mation to identify your case	et e							
Debtor 1	George D. Sullivan								
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	Susan Sullivan First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the: No	ORTHERN DISTRICT OF ILI	LINOIS						
Case number _							☐ Check	if this is	an
							amend	ed filing	
Official For	m 106F/F								
	E/F: Creditors W	ho Have Unsecu	red Claims						12/15
	d accurate as possible. Use Pa				. 12	NDDI	DITY III I		
eft. Attach the Con name and case nu	tors Who Have Claims Secured ntinuation Page to this page. If mber (if known).	you have no information to re							
	editors have priority unsecured								
□ No. Go	• •	olamo agamot you.							
	to Fait 2.								
Yes.		If a security of the second state of the secon		1:-4	41	4 . 1.		<b></b>	-1-1
listed, iden much as po	your priority unsecured claims. tify what type of claim it is. If a cla ossible, list the claims in alphabet on Page of Part 1. If more than on	im has both priority and nonprio ical order according to the credit	rity amounts, list that cla tor's name. If you have n	im h	ere and show be than two priority	oth pri	ority and nonprio	rity amou	
(For an exp	planation of each type of claim, se	e the instructions for this form in	n the instruction booklet.	)					
				Tot	tal claim		ority ount	Nonprio amount	•
2.1						<b></b>			
Illinois	Department of Revenue	Last 4 digits of account n	umber	\$	12,072.80	\$	12,072.80	\$	\$0.00
Bankru	reditor's Name Iptcy Section x 64338	When was the debt incurr	red?						
Chicag	o, IL 60664-0338	_							
Number S	Street City State Zlp Code	As of the date you file, the	e claim is: Check all the	at ap	pply				
	urred the debt? Check one.	☐ Contingent							
☐ Debto	r 1 only								
☐ Debto	r 2 only	☐ Unliquidated							
■ Debto	r 1 and Debtor 2 only	☐ Disputed							
☐ At leas	st one of the debtors and another								
commun	-	Type of PRIORITY unsecu							
Is the cla	im subject to offset?	☐ Domestic support obliga	ations						
■ No		■ Taxes and certain other	debts you owe the gove	ernm	ent				
☐ Yes		☐ Claims for death or pers	sonal injury while you we	re in	toxicated				
		Other. Specify							

2013 1040 taxes

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Debtor 1 George D. Sullivan Debtor 2 Susan Sullivan Case number (if know) 2.2 Internal Revenue Service 4,964.44 \$ 4,964.44 \$ \$0.00 Last 4 digits of account number Priority Creditor's Name Department of the Treasury When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of PRIORITY unsecured claim: ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Domestic support obligations ■ No ■ Taxes and certain other debts you owe the government ☐ Yes ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify 2009 1040 taxes 2.3 85,939.07 \$ **Internal Revenue Service** 75,000.00 \$ \$10,939.07 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? **Department of the Treasury** PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only At least one of the debtors and another Type of PRIORITY unsecured claim: ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Domestic support obligations ■ No Taxes and certain other debts you owe the government ☐ Yes ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify 2012 1040 taxes including penalties and fines Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 **Capital One** 9641 531.62 Last 4 digits of account number Priority Creditor's Name

Official Form 106 E/F

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Debtoi Debtoi	1 George D. Sullivan 2 Susan Sullivan	Case number (if know)		
	PO Box 6492	When was the debt incurred?		
	Carol Stream, IL 60197  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit card purchases	_	
4.2	Chase	Last 4 digits of account number 5908	\$	2,800.00
	Priority Creditor's Name PO Box 15123 Wilmington, DE 19886-5123	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit card purchases	_	
4.3	Chase	Last 4 digits of account number 5479	\$	700.00
	Priority Creditor's Name PO Box 15123 Wilmington, DE 19850-5123	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated		
	_			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit card purchases	_	
4.4	Chase Ink	Last 4 digits of account number 4789	\$	2,551.95

Last 4 digits of account number

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	George D. Sullivan Susan Sullivan	Case number (if know)	
	Priority Creditor's Name PO Box 15153	When was the debt incurred?	
_	Wilmington, DE 19886-5153 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
	Chase Slate	Last 4 digits of account number 9958	\$ 20,450.00
	Priority Creditor's Name PO Box 15153		
-	Wilmington, DE 19886-5153  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.6	City of Chicago Dept of Water	Last 4 digits of account number	\$ 889.33
	Priority Creditor's Name 121 N. LaSalle Street, 7th Floor	When was the debt incurred?	
	Chicago, IL 60602 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	_	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Cther Specify Utility bill	

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btor 2 Susan Sullivan	Case number (if know)		
City of Evanston, Hearings Division	Last 4 digits of account number	\$	65.00
Priority Creditor's Name 2100 Ridge Ave., Rm 2700 Evanston, IL 60201-2700	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	·		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Parking tickets		
ComEd	Last 4 digits of account number 4459	\$	72.0
Priority Creditor's Name PO Box 61111	When was the debt incurred?	·	
Carol Stream, IL 60197  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Utility bill		
Foran Glennon Palandech Ponzi	Last 4 digits of account number	\$	23,066.6
Priority Creditor's Name 222 N LaSalle St # 1400 Chicago, IL 60601	When was the debt incurred?	·	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

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4.1	Home Depot Credit Services Priority Creditor's Name	Last 4 digits of account number	1357	\$ 2,500.00

☐ Debts to pension or profit-sharing plans, and other similar debts

Insurance

■ No

☐ Yes

Other. Specify

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	George D. Sullivan Susan Sullivan	Case number (if know)					
	Dept 32 - 2138971357 PO BOX 183175	When was the debt incurred?					
	Columbus, OH 43218-3175  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only ☐ Debtor 2 only						
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit card purchases	_				
	Home Dept Credit Services	Last 4 digits of account number 0692	\$	29,904.00			
	Priority Creditor's Name Processing Center Des Moines, IA 50364-0500						
	Number Street City State Zlp Code						
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit card purchases	_				
4.1	Leff, Klein & Kalfen, LTD	Last 4 digits of account number	\$	22,000.00			
	Priority Creditor's Name  2205 Lakeside Drive	When was the debt incurred?					
	Bannockburn, IL 60015 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated					
	_	<u> </u>					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did					
		not report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Business debt					

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Debto Debto	r 1 George D. Sullivan Susan Sullivan	Case number (if know)	
4.1 5	Lowes/GECRB	Last 4 digits of account number 9368	\$ 7,285.00
	Priority Creditor's Name PO Box 530914	When was the debt incurred?	
	Atlanta, GA 30353-0914		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.1	Moshe Calamaro & Associates, Inc. Priority Creditor's Name 930 Pitner Avenue, Suite 7	Last 4 digits of account number  When was the debt incurred?	\$ 933.44
	Evanston, IL 60202  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	·	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Business debt	
4.1	Northshore University Health System	Last 4 digits of account number	\$ 1,792.00
	Priority Creditor's Name 23056 Network Place Chicago, II, 60673	When was the debt incurred?	

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

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4.2 0

Raincoat Roofing Systems Inc.

Priority Creditor's Name

Last 4 digits of account number

Debts to pension or profit-sharing plans, and other similar debts

**Utility bill** 

not report as priority claims

Other. Specify

1,500.00

■ No
□ Yes

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	1 George D. Sullivan 2 Susan Sullivan	Case number (if know)						
	1750 Parkes Dr. Broadview, IL 60155	When was the debt incurred?						
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only							
	■ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify  Business debt	_					
4.2	Resource Center	Last 4 digits of account number	\$	559.56				
<u>.</u> .	Priority Creditor's Name 222 E 135th PI	When was the debt incurred?	·					
-	Chicago, IL 60827  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.  ☐ Debtor 1 only	debt? Check one. ☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Recycling pickup	_					
4.2	Richmond North Associates	Last 4 digits of account number 5587	\$	150.00				
	Priority Creditor's Name 4232 Ridge Lea Rd #9	When was the debt incurred?						
=	Amherst, NY 14226  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts						
	□Yes	Other. Specify  Business debt						

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Debtor Debtor	George D. Sullivan Susan Sullivan	Case number (if know)					
4.2	Star Truckpointing Inc.	Last 4 digits of account number	\$	10,000.00			
	Priority Creditor's Name 5816 W. Irving Park Joliet, IL 60434	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.  □ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	■ Debtor 1 and Debtor 2 only	■ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?						
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Business debt	_				
4.2	Target Card Services	Last 4 digits of account number 3743	\$	11,395.91			
	Priority Creditor's Name PO Box 660170	When was the debt incurred?					
-	Dallas, TX 75266-0170  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
		As of the date you me, the damnis. Oneon all that apply					
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit card purchases	_				
4.2	The Jenkins Law Group	Last 4 digits of account number	\$	14,547.45			
	Priority Creditor's Name c/o Barone & Jenkins PC 17W 635 Butterfield Road Oakbrook Terrace II 60181	When was the debt incurred?	<b>*</b>	, -			

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

	Case	15-41016	Doc 1	Document	Page 32	-	02/15 17:48:50 9	Desc	viain
	George D			2000	Ū		umber (if know)		
,	Who incurred	the debt? Check of	one.	☐ Contingent					
	Debtor 1 on	ly							
	Debtor 2 on	ly		☐ Unliquidated					
	☐ Debtor 1 an	d Debtor 2 only		☐ Disputed					
	At least one	of the debtors and	d another	Type of NONPRIORITY	unsecured clai	m:			
	☐ Check if th	is claim is for a	ommunity	☐ Student loans					
I	s the claim su	bject to offset?		Obligations arising ou not report as priority claim		n agree	ement or divorce that you did	i	
	No			Debts to pension or p	rofit-sharing plan	ns, and	d other similar debts		
1	☐ Yes			Other. Specify	Judgment	in 23	3-AR-1940		
			meone else, list the originate tyou listed in Parts 1 or 2,	al creditor in Pa list the addition art 1 or Part2 ne):	arts 1 on all cree  2 did  Part 1	or 2, then list the collection editors here. If you do not	n agency he have addition creditor?  Unsecur	re. Similarly, if you nal persons to be	
Chicag	o, IL 60604			Last 4 digits of accou	unt number				
Part 4:	Add the A	mounts for Eac	h Type of Un	secured Claim					
6. Total th		certain types of u		ms. This information is for	statistical repo	orting		159. Add th	e amounts for each
To	6a. otal	Domestic supp	ort obligations	:	(	6a.	Total claim \$	0.00	
	ms	Tayon and conta	sin athau dahta	the messagement	,	Ch	400		
from Pa	rt 1 6b. 6c.			s you owe the government injury while you were intox		6b. 6c.	\$102,9	976.31 0.00	
	6d.		-	ecured claims. Write that an		6d.	\$	0.00	
									7

				l otal o	laim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	102,976.31
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	102,976.31
				Total Clain	1
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that			
	- 3	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	159,752.94
	6j.	Total. Add lines 6f through 6i.	6j.	\$	159,752.94

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		I A A A A II I I		
Fill in this infor	mation to identify your	case:		
Debtor 1	George D. Sulliva	an		
	First Name	Middle Name	Last Name	
Debtor 2	Susan Sullivan			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Kristopher Luck and Keith Jones 7716 N. Ashland Ave. #1 Chicago, IL 60626	Residential apartment lease and lease for garage space through 11/30/2019
2.2	Markus Zuniga & Stacy Warden 7716 N. Ashland Ave. #2 Chicago, IL 60626	Residential apartment lease and lease for garage space through 11/30/2017

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		Documen	t Page 34 of	39	
Fill in this i	information to identify your	case:			
Debtor 1	George D. Sulliva	n			
	First Name	Middle Name	Last Name		
Debtor 2	Susan Sullivan	ACT III AI			
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
Case numb	er				
(if known)	·				☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	obtoro			
Sched	ule n. Your Cou	EDIOI 2			12/15
ill it out, an your name a 1. Do y □ No ■ Yes 2. With	illing together, both are equal number the entries in the and case number (if known). ou have any codebtors? (If y in the last 8 years, have you a, California, Idaho, Louisiana,	boxes on the left. Attach the left is a community property of the left is a community property of the left is a community property in a community property is a community property in a community property is a community property in a community property in a community property is a community property in a community property in a community property is a community property in a community property in a community property is a community property in a community prop	he Additional Page to to not list either spouse as perty state or territory?	this page. On the top of any s a codebtor.  ? (Community property states	y Additional Pages, write
■ No. (	Go to line 3.				
_	Did your spouse, former spou	use, or legal equivalent live v	with you at the time?		
	. ,	,	,		
in line : Form 1	ımn 1, list all of your codebt 2 again as a codebtor only it 06D), Schedule E/F (Official lumn 2.	f that person is a guaranto	r or cosigner. Make su	ire you have listed the cred	
	Column 1: Your codebtor				o whom you owe the debt
N	ame, Number, Street, City, State and ZI	P Code		Check all schedules that	apply:
7 C	ico Smart Building LLC 716 N. Ashland Ave, Unit Chicago, IL 60626 Ico Smart Building LLC is		7 matter	■ Schedule D, line □ Schedule E/F, line _ □ Schedule G Volkswagon Credit	

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Fill in this informa	tion to identify your case:	
Debtor 1	George D. Sullivan	
Debtor 2 (Spouse, if filing)	Susan Sullivan	
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	□ Not employed
employers.	Occupation	Engineer (self-employed)	Office Manager
Include part-time, seasonal, or self-employed work.		Net Zero Analysis & Design	
	Employer's name	Corp.	IER
Occupation may include student or homemaker, if it applies.	Empleyerle eddress	•	
or nomemaker, it it applies.	Employer's address	7716 N. Ashland Ave, Unit 3	500 Davis St.
		Chicago, IL 60626	Evanston, IL 60202
	How long employed ti	here? 4 months	10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Deptor 1		filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	0.00	\$	2,957.60
3.	Estimate and list monthly overtime pay.	3.	+\$	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	0.00	\$_	2,957.60

Official Form 106I Schedule I: Your Income page 1

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Deb Deb	tor 1 tor 2	George D. Sullivan Susan Sullivan	_	(	Case	e number (if known)	_					
					Fo	r Debtor 1		For Do		2 or pouse		
	Cop	by line 4 here	4.		\$_	0.00		\$	2,	957.6	0	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	0.00		\$		588.9	5	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	-	\$		0.0	_	
	5c.	Voluntary contributions for retirement plans	5c	<b>)</b> .	\$	0.00	-	\$		40.0		
	5d.	Required repayments of retirement fund loans	5d	d.	\$	0.00		\$		0.0		
	5e.	Insurance	5e	€.	\$	0.00	•	\$		0.0	0	
	5f.	Domestic support obligations	5f.		\$	0.00	•	\$		0.0	0	
	5g.	Union dues	5g	<b>]</b> .	\$	0.00		\$		0.0	0	
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.00	+	\$		0.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00	_	\$		628.9	5_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0.00	_	\$	2,	328.6	5_	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	4 666 00		\$		0.0	•	
	8b.	Interest and dividends	8b		<b>\$</b> -	1,666.00 0.00	-	\$		0.0	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			Ψ_ \$		-	\$				
	8d.	Unemployment compensation	8d		\$ \$	0.00	-	\$		0.0	_	
	8e.	Social Security	8e		\$ _	0.00	-	\$		0.0	_	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income		•	\$_ \$_	0.00	-	\$ \$		0.00	0	
	8h.	Other monthly income. Specify:		). 1.+	\$	0.00	. +	·		0.0	_	
_				Г	<u> </u>		. · ]				_	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Ę	\$	1,666.00		\$		0.0	00	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,666.00 + \$		2 22	8.65	= \$	3	,994.65
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,000.00 T		2,52	0.03	-  <sup>-</sup>	٥,	334.03
11.	Inclionation of the other of th	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not scify:	r depe			.,	,		hedule 11.			0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$		,994.65
13.	Do	you expect an increase or decrease within the year after you file this form	1?							Comb		l ncome
		No.										
	П	Yes. Explain:										

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	in this informa	ation to identify yo	our case:			1		
						0.1		
Deb	tor 1	George D. S	ullivan			Che	ck if this is:  An amended filing	
Deb	tor 2	Susan Sulliv	/an				A supplement show	wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
Be a info nun	as complete ormation. If m nber (if know	and accurate as nore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people arch another sheet to this				
Part 1.	t 1: Desci	ribe Your House	ehold					
••	□ No. Go to							
		es Debtor 2 live	in a separa	ate household?				
	■ N	lo						
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you hav	e dependents?	■ No					
۷.	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the		·				□ No
	dependents							☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ Yes
								☐ Yes
3.		penses include	_	No	-		_	
		f people other t d your depende	han $_{\square}$	Yes				
Esti	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance if luded it on <i>Schedule I:</i> Y			Your exp	enses
•		,						
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$	8,928.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ipkeep expenses		4c.		1,000.00
5.		owner's associa		dominium dues our residence, such as hoi	me equity loans	4d. 5.	·	0.00
٥.	Additional	igage payiii	cinco for yo	on residence, such as not	no equity loans	٥.	Ψ	0.00

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_	_		
Susan Sullivan	Case num	ber (if known)	
ies:			
Electricity, heat, natural gas	6a.	\$	300.00
Water, sewer, garbage collection	6b.	\$	100.00
Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	240.00
Other. Specify: Recycling	6d.	\$	50.00
Storage		\$	400.00
and housekeeping supplies	7.	\$	600.00
dcare and children's education costs	8.	\$	0.00
ning, laundry, and dry cleaning	9.	\$	250.00
onal care products and services	10.	\$	50.00
cal and dental expenses	11.	\$	300.00
sportation. Include gas, maintenance, bus or train fare.	40	Φ.	300.00
· ·		·	300.00
		·	150.00
•	14.	\$	20.00
	15a.	\$	0.00
		·	0.00
Vehicle insurance			130.00
		·	0.00
ify:	16.	\$	0.00
Ilment or lease payments:			
Car payments for Vehicle 1			0.00
Car payments for Vehicle 2		•	0.00
			552.00
		\$	0.00
		¢	0.00
	10.		
	10	Ψ	0.00
·		our Income.	
Mortgages on other property			0.00
Real estate taxes	20b.	\$	0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
r: Specify: Pet - food and healthcare for cat	21.	+\$	100.00
ulate your monthly expanses			
		e e	13,470.00
· · · · · · · · · · · · · · · · · · ·			13,470.00
		l '	
Add line 22a and 22b. The result is your monthly expenses.		<b>\$</b>	13,470.00
ulate your monthly net income.			
Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,994.65
Copy your monthly expenses from line 22c above.	23b.	-\$	13,470.00
			, , , , , , , , , , , , , , , , , , ,
Subtract your monthly expenses from your monthly income.	00.5	•	-9,475.35
The result is your monthly net income.	230.	φ	-9,470.00
ou aynact an increase or decrease in your expenses within the year offer y	ou filo thio	form?	
			rease or decrease because of a
ication to the terms of your mortgage?		,,	1. 221.2230 0000000 01 U
0.			
es. Explain here:			
	ites: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Recycling Storage Idea and children's education costs Ining, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. ratinment, clubs, recreation, newspapers, magazines, and books Itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Uther insurance defunded from your pay or included in lines 4 or 20. Life insurance. Specify: S. Do not include taxes deducted from your pay or included in lines 4 or 20. Iffy: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106). rayments you make to support others who do not live with you. Iffy: real property expenses not included in lines 4 or 5 of this form or on Sch Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues r: Specify: Pet-food and healthcare for cat ulate your monthly expenses Add lines 22 and 22b. The result is your monthly expenses. Lulate your monthly expenses from line 22c above.  Subtract your monthly expenses from line	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Recycling Storage I and housekeeping supplies Icare and children's education costs I and housekeeping supplies I and houseking	Interest   Interest

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Till ill tills illion	mation to identify your o	ase.		HOLD THE REAL PROPERTY.	
Debtor 1	George D. Sulliva	Management of the Colored States	Last Name		
Debtor 2 (Spouse if, filing)	Susan Sullivan First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Form	<sub>n 106Dec</sub> tion About a	n Individual	Debtor's S	chedules	12/15
			auptcy case can result		00, or imprisonment for up to 20
DESCRIPTION OF THE PROPERTY OF	8 U.S.C. §§ 152, 1341, 19		nupley case can result		
Sign		519, and 3571.			
Sign	n Below	519, and 3571.			
Sigi Did you pa ■ No	n Below	519, and 3571.	rney to help you fill out	bankruptcy forms?	tion Preparer's Notice, Declaration,

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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